Mental Health Call Minutes

10/15/2015

Attendees

- Central Office: Sue Wherry
- Region 1: Holly Morganstean, Mary Payton, Holly Bonwell
- Region 2: Joyce Lyons, Sheri Owens,
- Region 3: Sherri Edwards, Jaime Ward, Heather Taylor
- Region 4: Jennifer Burlage, Kari Portales, Julie Matta, Teresa Shackleford
- Region 5: Sally Bryan, Paula Miller, Scott Rassmussen
- Region 6: Sue Chadwick, Cindy Wilson, Michele Osmond,
- Region 7: Randy Rodriquez, Danielle Stohl
- Hub Admin: Tracey Sessions, Gina Westcott, Todd Hurt

WITS Release Notes:

Not reviewed on call as there are no major changes for Mental Health.

Diagnosis in WITS Update:

Reviewed the concerns from regional staff with regards to the new Diagnosis process in WITS requiring as Diagnosis in each of the 3 dimensions (Behavioral, Medical and Psychosocial). Also of concern are the Diagnosis options that were provided as a suggestion when there is no diagnosis. "The descriptions for these codes are misleading."

A decision was made yesterday on the Program Manager's call which will remove the requirement to have a diagnosis in each dimension. WITS HelpDesk team is working with FEi to determine how much this will cost and when it could be implemented. Another concern expressed was the fact we are still requiring a GAF score in WITS when it is no longer a requirement with the DSM-5 diagnosis. It was requested that regional staff discuss this with the Program manager's and respond by the close of business today (10-15-15) as to rather they have a clinical need or use of the GAF Score or if they would like it removed as a requirement also. A response has been received from most regions and the consensus is that the GAF should not be required. This information has been relayed to FEI and an update will be provided when we have more information with regards to the timeline.

The following questions were sent via an email but were not discussed on the call.

- 1. Q: It appears we are still having trouble with the new diagnosis showing up on the encounter notes, even though the diagnosis has been updated on the diagnosis list. A: There is currently a 'Bug' in WITS that affects encounters created from the scheduler or groups. If an encounter is created from the scheduler or a group session the diagnosis will not populate correctly. All other encounters are populating correctly at this time. FEi is aware of the problem and are working on the resolution.
- 2. Q: Can we have an update on that as well an update on what to do with treatment

plans that were started before the ICD 10 update and now they can't enter a diagnosis.

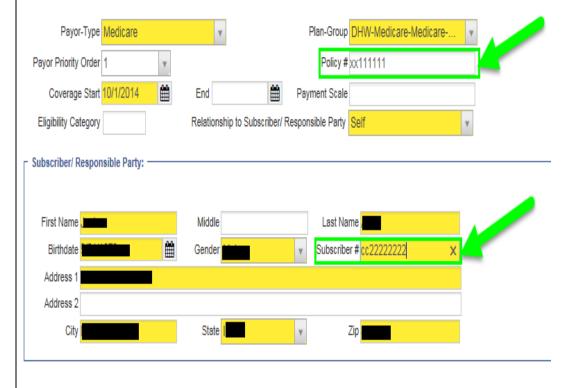
A: If a Treatment Plan was started prior to 10/1/15 and not completed, you can; a.) Submit a Support ticket in WITS providing the diagnosis code(s) that you are attempting to enter for each axis (1-4)and requesting the diagnosis be entered. Or b.) Create a new treatment plan dating it after 10/1/15 to then use the DSM-5 diagnosis.

Entering/Identifying Medicare Insurance in WITS

Over the past year as we have been actively billing for MH Services, we have encountered some inconsistencies with the information entered into WITS. Some regions are entering Medicare coverage plans while others are not. The revenue unit has been processing the billing and has received several notifications back stating the Insurance coverage is a Medicare plan. I was informed "in the CMS guidelines, as a government provider we are excluded from the Medicare program (with a few exceptions). By extension, we can't bill advantage plans either". Last month I requested each region provide a list of the clients who have Medicare coverage and a copy of the insurance cards. Thank-you to all who provided that information to us. In reviewing the information provided there are several Insurance companies that provide Medicare Insurance policies and Non-Medicare policies under the same name and same address. To Add all of these would make the list very long, difficult to manage and cumbersome for those entering in the Client group Enrollments. With all this in mind we have created an option in the client Group Enrollment drop-down for <u>ALL</u> Medicare policies (because we cannot bill them, it is not imperative that they be listed individually). :

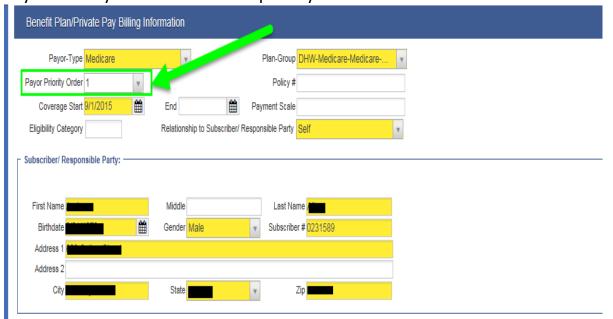
In the <u>Payor Type</u> Select Medicare

In the **Plan-Group select** DHW-Medicare



This allows the regional staff to document the client has Medicare Insurance, While allowing the revenue Unit a method for identifying the Medicare policies entered in WITS.

<u>IF</u> a client has more than one benefit plan, <u>The Priority Order</u> can be modified. For Example: a client with Medicare and Self-Pay (and a fee Percentage obligation) would have the Self-Pay as Priority 1 and Medicare as priority 2.



The DHW-Medicare plan has been created in WITS for all regions. If you identify a client as having Medicare, Please update the client group enrollment. Documenting Medicare coverage in WITS is not a requirement but a tool for the regions to use for tracking these clients if desired.

Other:

Thank-you Danielle for bring this to our attention here in CO - FYI – The fee brochure is updated for FY 2016 with current service titles and rates. Service titles were selected based on the services most often recorded in WITS. If there is a service that needs to added, please let me know. The brochure is located on SharePoint at

http://sharepoint/sites/BH/policy/Attachments/2016 Fee Determination Brochure.pdf. If you have difficulty with the link, it is located on the Policy page at the bottom of the section titled "Policy Attachments and Forms

<u>Crisis Program Enrollment</u>: Several Months ago we discussed the option of creating a Program enrollment allowing notes to be entered and Medications to be administered on a short term basis without requiring an admission. There are several similar programs currently being utilized by various regions but none are consistent with ALL regions. The desire to have a program for the same purpose and with the same name in each region was expressed again this month. After a brief discussion of the benefits of this option, it was determined that Sue Wherry will create the "Crisis Program" in WITS that will be used by all regions for the purpose of tracking this population. A description and requirements will be sent to regions for final approval prior to implementing.